PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	
First Inventor	
Title	

(Only for new nonprovisional applicati	ons under 37 CFR 1.53(b))	Express Ma	ail Label No.	I		وٰ	
APPLICATION EL	ADDRE	ADDRESS TO: Assistant Commissioner for Paten Box Patent Application					
See MPEP chapter 600 concerning utilit			Washington,	DC 20231	ď		
1. Fee Transmittal Form (e.g., P. (Submit an original and a duplicate for fee Applicant claims small entity see 37 CFR 1.27.  3. Specification [76] (preferred errangement set forth below - Descriptive title of the inver - Cross Reference to Related - Statement Regarding Fed - Reference to sequence list or a computer program listiful - Background of the Invertice - Brief Summary of the Invertice - Brief Description of the Drawing (S) - Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113)  5. Oath or Declaration  a. Newly executed (original Copy from a prior applice (for continuation/division)	8. Nucleot (if appli ai b. Specific c	Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. (when there is an assignee) Power of Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment					
i. DELETION OF II Signed statement attact named in the prior appli 1.63(d)(2) and 1.33(b).	15	Nonpublication Paguest under 35 U.S.C. 122					
6 Application Data Sheet. See	37 CFR 1.76	17.	Other:	• • • • • • • • • • • • • • • • • • • •			
18. If a CONTINUING APPLICATION, cf or in an Application Data Sheet under 37 Continuation Divisional Prior application information: Exami For CONTINUATION OR DIVISIONAL APPS	CFR 1.76: Continuation-in-part (CIP)	of pric	or application No.:	low and in a p	oreliminary amendn		
Box 5b, is considered a part of the disclose The incorporation can only be relied upon	are of the accompanying contin	uation or division	nal application a	nd is hereby in	corporated by refere	nce.	
	19. CORRESPOND	ENCE ADDRES	ss		-		
Customer Number or Bar Code Label	(Insert Customer No. or Atlach ba	ar code label here)	or 🔀	Correspond	dence address below		
Name THO	mas G. Ceheli	nik					
	Bux 4278						
Address							
city Ma	dle town	State	RI	Zip C	Code 0284	2	
Country US	~~~~	Janhana 110	1-842-37	167 Fa			
	rei	ephone 40	1-072-51	0 d	<u>^</u>		
Name (Print/Type) Tho M	ns G. Cehelnik		tion No. (Atto		<u>^</u>	7	

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PTO/SB/17 (01-03)

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		Complete if Known					
FEE TRANSMITTAL		Application Number					
for FY 2003 /Effective 01/01/2003. Patent fees are subject to annual revision.		Filing Date					
		First Named Inventor	THOMAS G. Cehelnik				
		Examiner Name					
Applicant claims small entity status. See 37 CFR 1.27		Art Unit					
TOTAL AMOUNT OF PAYMENT	(\$)	Attorney Docket No.					
AL ASSELLOD OF DAVISENT (chool	k all that early)	FEE CA	ALCULATION (continued)				

METHOD OF PAYMENT (check all that apply)						
	None 3. ADDITIONAL FEES					
thack Credit card Money Order Other None	Large E					
Deposit Account: See Credit Card Form	Fee Code		Fee F Code	ee (\$)	Fee Description	ee Paid
Deposit Account	1051	130	2051		Surcharge - late filing fee or oath	
Number Deposit	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Account Name	1053	130	1053		Non-English specification	
The Commissioner is authorized to: (check all that apply)	1812	2,520	1812 2	2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge any additional fee(s) during the pendency of this application		4 0 4 0 1	1005	1 040*	Requesting publication of SIR after	1
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1000	.,040	Examiner action	
to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	410	2252	205	Extension for reply within second month	
1. BASIC FILING FEE Large Entity Small Entity Eac Paid	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Description	1254	1,450	2254	725	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	
370,00	1401	320	2401	160	Notice of Appeal	
1002 330 2002 165 Design filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1000 020 Prince Stine See	1403	280	2403	140	Request for oral hearing	
D. Minus Silve So.	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1000 100	1452	110	2452	55	5 Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 370.00	1453	1,300	2453	650	Petition to revive - unintentional	<b> </b>
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	0 Utility issue fee (or reissue)	
Extra Claims Fee from Fee Paid						
Total Claims 2.0** = 0 × = 0	1503	630	2503	3 31	5 Plant issue fee	
Independent 3 - 3 - 5 X = O	1460	130	1460	13	Petitions to the Commissioner	
Multiple Dependent =	1807	50	180		0 Processing fee under 37 CFR 1.17(q)	<b> </b>
Large Entity   Small Entity	1806	180	180	6 18	O Submission of Information Disclosure Stmt	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	8021	40	802		Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	280	9 37	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	281	0 37	75 For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent	180	1 750	2801	37	75 Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	180	2 90	1802	2 90	Nequest for expedited examination of a design application	
(a) O 2			pecify)			
SUBTOTAL (2) (\$) (.0)	O.O				<u> </u>	
**or number previously paid, if greater; For Reissues, see above					(Complete (if applicable)	

	usly paid, if greater, i or researce,		(Complete	(if applicable)	
Name (Print/Type)	Thomas G. Cehelnik	Registration No.	Telephone 401-842-3762		
	100	(Attomey/Agent)	Date	D2/05/2004	
Signature	Thrond & Careline		dief meti nicho	uld n t	

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